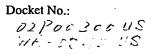
APPLICATION FOR UNITED STATES PATENT **DECLARATION AND POWER OF ATTORNEY**



As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor

(if plural inventors are	RUCTURE, METHOD FOR MANUE	h is claimed and for which a patent is sought on the PACTURING HONEYCOMB STRUCTURE,	AND EXHAUST				
described and claimed	. and Dr	JRIFICATION SYSTEM USING HONEYO	COMB STRUCTURE				
Check one	op •••						
*a. 🛛 attached	nereto.						
b. 🔲 filed on	as Application No.	and amended on	(if applicable).				
c. described	and claimed in PCT International Applic	ation Nofiled on	and				
as amend	ed under PCT Article 19 on	(if any).					
amended by any amer	dment referred to above.	the contents of the above-identified specification,					
I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.							
Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:							
Japanes	se Patent Application No.	, 2002-297713 filed on October 1	0, 2002.				
States of America eit		s certificate on this invention were filed in country pplication, or (b) before the filing date of the above					
	sact all business in the Patent Office: James A. Oliff, Reg. No. 27,0' Kirk M. Hudson, Reg. No. 27	record with full power of substitution and revolves; William P. Berridge, Reg. No. 30,024; ,562; Thomas J. Pardini, Reg. No. 30,411; 81,450; Robert A. Miller, Reg. No. 32,771;	ocation to prosecute this				
		. 33,565; Stephen J. Roe, Reg. No. 34,463;					
	Joel S. Armstrong, Reg. No. 36,430; Christopher W. Brown, Reg. No. 38,025;						
	Richard E. Rice, Reg. No. 3	31,560; and Paul Tsou, Reg. No. 37,956.					
	DENCE IN CONNECTION WITH TO 28, ALEXANDRIA, VIRGINIA 22320,	HIS APPLICATION SHOULD BE SENT TO (TELEPHONE (703) 836-6400.	OLIFF & BERRIDGE,				
own knowledge are t were made with the l	rue and that all statements made on infor mowledge that willful false statements an 18 of the United States Code and that su	If the contents of this Declaration, and that all states mation and belief are believed to be true; and further that it is so made are punishable by fine or improach willful false statements may jeopardize the validation.	ther that these statements isonment, or both, under				
Typewritten Full			WA T				
of First or Sole I	eventor Ryuji Given Name	Middle Initial	KAI Family Name				
**Inventor's Sign		Ryuji Kai	railing Name				
**Date of Signatu			2003				
	Month	Day	Year				
Residence:	Nagoya-city,	Aichi-prefecture,	Japan				
_	City	State or Province	Country				
Citizenship:	Japanese						
]	ost Office Address:						

including country) Aichi-prefecture, 467-8530 Japan *If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

(Insert complete mailing address,

1

2 3

c/o NGK Insulators, Ltd.,
2-56, Suda-cho, Mizuho-ku, Nagoya-city,

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

71A-0842 L'S

1 Typewritten Full Name		Toshio		YAMADA
of Second Joi	nt Inventor (if any)	Given Name	Middle Initial	Family Name
2 **Inve	ntor's Signature:	Joshio	Yamada	_
	of Signature:	September	19th.	2003
J Date		Month	Day	Year
Danidanaa	Nagova		Aichi-prefecture,	Japan
Residence		ity	State or Province	Country
Citizenshi		ity	State of Trovince	,
Citizensiii				
	Post Office Address: (Insert complete	c/o NGK	Insulators, Ltd.,	
	mailing address,		da-cho, Mizuho-ku, Nag	oya-city,
	including country)	Aichi-pre	efecture, 467-8530 Jap	an
1 T	-			
	ritten Full Name Inventor (if any)			
oj inira somi		Given Name	Middle Initial	Family Name
2 **Inve	ntor's Signature:			
	of Signature:			
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Residence	:			
	C	ity	State or Province	Country
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<i>սյ 1 մայա 30</i> 0	suremor (ij uny)	Given Name	Middle Initial	Family Name
2 **Inve	ntor's Signature:			
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	mailing address, including country)			
	ritten Full Name Inventor (if any)			
oj rijin Joint	inventor (ij any)	Given Name	Middle Initial	Family Name
2 **Inve	ntor's Signature:	Circii i milio		
	of Signature:			
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Citizenshi			***	
	Post Office Address:			
	(Insert complete mailing address,			·
	including country)			

Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.